

CENTRAL INTELLIGENCE AGENCY

INFORMATION REPORT

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COUNTRY East Germany

REPORT

SUBJECT Miscellaneous Notes on Public Health
in Halle/Saale

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This is UNEVALUATED Information

THE SOURCE EVALUATIONS IN THIS REPORT ARE DEFINITIVE.
THE APPRAISAL OF CONTENT IS TENTATIVE.
(FOR KEY SEE REVERSE)

1. The Public Health Office in Halle/Saale, located at Schmeerstrasse 1, was directed by Dr. Zipprich (fnu)². He was politically unaffiliated and had been instrumental in reducing the tensions existing between the free-practicing and the government-employed physicians. Dr. Crahmer (fnu)², an SED member, worked with Zipprich.
2. Zipprich had been responsible for the creation of the Commissioned Medical Service (Kommissionsaerztlicher Dienst) of the DDR and had been called upon repeatedly by Dr. Kuebelstein (fnu), the director of the Commissioned Medical Service, to organize the Service in Berlin. Zipprich had refused. Crahmer had been rejected for the task by the majority of the physicians in Halle/Saale because he was a convinced follower of the SED.
3. Leading medical facilities in Halle/Saale:
 - a. North Polyclinic possessed complete specialty departments and was well staffed. The chief physician, Dr. Bartels (fnu)², was politically unaffiliated. A Commissioned Medical Service was attached to North Polyclinic. The Chief physician of the Service was Dr. Kuechelstein (fnu) who was also politically unaffiliated.
 - b. The Government Railroad Clinic was poorly staffed, particularly in specialists. The director, Dr. Wolf (fnu)² was primarily an SED functionary.
 - c. South Polyclinic was directed by Dr. Schulz (fnu)² who was politically unaffiliated and a convinced opponent of the East Zone regime. The clinic was well staffed in all specialty departments and was the best polyclinic in Halle/Saale. City Hospital No. 1 was attached to this polyclinic.
 - d. More than 100 industrial first aid stations (Betriebssanitaetsstellen)

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were located in Halle/Saale. These were medical posts which were staffed on a part-time basis, usually by free-practicing physicians. Consultation hours were held two to four times a week, depending on the strength of the labor force.

4. Halle/Saale was one of the few large cities in the DDR where the number of physicians was entirely sufficient. No free-practicing physicians had been allowed to settle in Halle since 1947 and, therefore, the number of such practitioners was steadily declining. The tendency among the older physicians was to go into the polyclinics with the hope of eventually obtaining State care in their old age. The cadre department passed on all applications for positions in the polyclinics and many of the older physicians had been rejected for such positions. The reasons given for these rejections were failures to meet physical standards but they were, in reality, political. However, cooperation between the free-practicing physicians and the physicians in the polyclinics was relatively good. Urgent housecalls were carried out predominantly by the free-practitioners while the ambulatory patients usually went to the polyclinics or industrial first aid stations. A well-organized Sunday and night service operated in the name of the polyclinics but the free-practicing physicians were cut into the service.
5. A home for the aged who were in need of nursing care was located in Halle/Saale. This home had 710 beds. In addition, five other homes (Aussenheime) were available for healthy and ambulatory old people. The supply of medicines in the Homes was good.
6. In general, Halle/Saale was constantly short of medicines, particularly salvarsan and high-quality sulfonamides. Penicillin was good, and the supply was sufficient. The supply of products such as caffeine and codeine was in a state of constant fluctuation and a perpetual shortage in high-quality drugs and pharmaceuticals existed.
7. The supply of medicines at the Reil Caserne, which was an Infantry Officers' School for the training of intelligence (Nachrichten) officers, was very poor, even worse than in the Public Health Department and the District Organization of the People's Police (Bezirksbehoerden der Volkspolizei/ BdVP/). Emergency prescriptions had to be paid for by the officers themselves; otherwise, prior approval of the Ministry of Interior (Ministerium des Innern /MdI/) was necessary. The Social Insurance organization (Sozialversicherungskasse /SVK/) was required to perform medical services only in cases where life was endangered, where danger of blindness was present, in cases of exhaustion and in cases of underweight, especially in officers. Medical discharges were possible only on the advice of the Third Commission (KVP-Kurhaus, Leipzig).
8. The supply of pharmaceuticals in the Penitentiary "Am Kirchtor", otherwise known as the "Red Bull", was good. High quality pharmaceuticals could be procured quickly in cases of serious illness. The prison was occupied by approximately 750 women, a large number of whom were criminals. The prison had a dental station and a laboratory operated by imprisoned dentists and doctors respectively. X-ray equipment was lacking. Suspicious cases which required X-ray had to be transferred to the Prison hospital in Leipzig-Wiederitzsch. For four of these cases. Numerous tuberculosis cases had been isolated in the TB station and sputum analyses were continually carried out. Infectious cases were not allowed to remain in the prison but were removed to the Leipzig prison hospital. Transfer of infectious patients was carried out efficiently and without opposition from prison authorities. The material condition of the prisoners was relatively good. Although the quality of the food was only fair, the quantity was sufficient.
9. Venereal diseases were definitely declining in Halle/Saale even though no salvarsan was available. The substitute for this drug was "Neo-Asellion" (sic). Gonorrhea was predominant among the KVP members. The sources of infection were allegedly "imported" from West Germany.

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10. Exhaustion and depression states of the more serious types were found especially in young teachers, in SED functionaries and in VP members who suffered from overwork or who did not have the mental prerequisites required of them.

1.  Comment. The Kommissionsärztlicher Dienst is a part of the East German Public Health system. The tasks of the Service are to control the accuracy of diagnosis; to determine the necessity for therapeutic intervention and to establish therapeutic methods for rapid recovery; to remove obstacles which retard or delay recovery; and to abolish work absenteeism without sufficient medical reason.

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2.  Comment. The Halle/Saale telephone directory for 1950 lists the following names and addresses:
 Walter Zipprich Dr. med. Rathenaplatz 19, C2
 Friedrich Gramer, Amtsrat (official physician), Friedenstrasse 21, C2
 Rudolf Wolf, stellvertretender Amtsrat (deputy official physician),
 Rudolf-Breitscheidstrasse 92, C2
 Guenther Bartels, Dr. med., Ad. v. Harnackstrasse 23, C2
 Schulz Dr. med., Lafontainestrasse 21, C2

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